

Candidate with Committee

Form CPF M 102: Campaign Finance Report Municipal Form RECEIVED

Office of Campaign and Political Finance

of Massachusetts	2021 0C1 26 PM 5: 52
Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commi
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	
Herbert Daye	
Candidate Full Name (if applicable) City Council	Committee to Elect Herbert Lee Daye Committee Name
Office Sought and District	Denise Pachebat
81 Red Circle, Taunton, MA 02780	Name of Committee Treasurer 20 Baylies Road, Taunton, MA 02780
Residential Address	Committee Mailing Address
Phone # (optional):	E-mail:ctedaye2021@gmail.com
note # (optional):	Phone # (optional):
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 1) Line 5: Ending Pales as (line 2 and the state of the stat	0.00 3,530,00 3,530:00
Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (pa	7/2,83
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Rockland Trust, 275	New State Hwy, Raynham, MA 02767
fidavit of Committee Treasurer: ertify that I have examined this report including attached schedules and it is, to the best ivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind cance activity of all persons acting under the authority or on behalf of this committee in a med under the penalties of perjury: OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 10/2/2011

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
05/08/2021	Sherry Costa Hanlon 9 Madison Street Taunton, MA 02780	100.00		
05/14/2021	Jessica Daye 81 Red Circle Taunton,MA 02780	100.00		
05/14/2021	Ashan Fernando 39 Townley Dr Berkley, MA 02779	55.00		
05/17/2021	John Foley 12 Lewis St. PROVIDENCE, RI 02906	50.00		
05/26/2021	Jamie Kelley 208 Scadding St Taunton, MA 02780	100.00		
06/06/2021	Mathew Pfeil 15 Regency Place North Andover, MA 01845	200.00	Finance CEA Fresh Farms	
06/28/2021	Philip Boucher 1567 Middleboro Ave East Taunton, MA 02718	50.00		
06/29/2021	Natacha Beaudry 71 Brian Ave. Somerset, MA 02726	100.00		
06/30/2021	Aiden Scully 780 Whittenton St Taunton, MA 02780	100.00		
07/04/2021	Abimael Cruz 154 broadway Taunton, MA 02780	100.00		
07/12/2021	Haskell Kennedy P.O. Box 6045 New Bedford, MA 02742	200.00	Entrepreneur Self	
07/14/2021	Tamika Jacques 559 Ash Street Brockton, MA 02301	250.00	Director Fruitful Vision Enterprises	
ine 9: Total Recei	pts over \$50 (or listed above)	1405.00		
ine 10: Total Rece	ipts \$50 and under* (not listed above)	135.00		
ine 11: TOTAL F	RECEIPTS IN THE PERIOD	1540.00	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
07/24/2021	Kathleen Tourinho 12 King St Taunton, MA 02780	100.00	(cor sometions of \$250 or more)
07/24/2021	Alison Rosa 34 Hodges Ave, Apt 2 Taunton, MA 02780	50.00	
07/24/2021	Desiree Gonzales 207 Winthrop Street Taunton, MA 02780	50.00	
07/24/2021	Philip Duarte 8 Trescott Street Taunton, MA 02780	50.00	
07/24/2021	Nancy Everidge 37 Briggs Street Taunton, MA 02780	50.00	
07/24/2021`	John Hanlon 9 Madison Street Taunton, MA 02780	100.00	
07/24/2021	Barry Sanders 25 Kilmer Street Taunton, MA	50.00	
07/24/2021	Janet Anderson 22 Garfield Street Taunton, MA 02780	50.00	
07/24/2021	Rochelle Silva 7 Berkley Street Taunton,MA 02780	100.00	
07/24/2021	Orlando Ocasio 144 School Street Taunton, MA 02780	100.00	
8/02/2021	Lisa Doherty 28 Field Street Taunton, MA 02780	50.00	
8/03/2021	Lisa Field PO box 414 Raynham, MA 02767	50.00	
8/10/2021	Cora Martin 18 Spring St apt 115 Taunton, MA 02780	50.00	
ine 9: Total Recei	pts over \$50 (or listed above)	850.00	
ine 10: Total Rece	ipts \$50 and under* (not listed above)	265.00	
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	1115.00 ←	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
08/13/2021	Sherry Costa Hanlon 9 Madison Street Taunton, MA 02780	100.00	
08/15/2021	Martin Diaz 63 Erin Road East Taunton, MA 02718	100.00	
09/04/2021	Christian Lassiter 311 Kerneway Baltimore, MD 21212	500.00	Attorney Federal Public Defender
9/13/2021	Johathan Gray 67). Cohamet Street Tarries, majories	\$25.00	
9/14/2021	Kara CIVALE 110 Draw Street TANTON, MA OSTR	B.50.0	
9/15/2021	Michael Moits SAVIlla DR TAUNTON, MA 05780	\$25.00	
9/16/201	Kay Loper 1130 Middleboo Are TAINTON, MA 00710	\$35.00	
4 polyon	Glorin Kloner 3 Harrison Steet TAUNTON, MA 02780	850.00	
Line 9: Total Rece	cipts over \$50 (or listed above)	875.00	
Line 10: Total Rec	eipts \$50 and under* (not listed above)	O 0	
	RECEIPTS IN THE PERIOD	875,0	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
07/03/2021	UPrinting	8000 Haskell Ave, Van Nuys, CA 91406	Magnets	55.20
07/13/2021	PrintRunner	8000 Haskell Ave, Van Nuys, CA 91406	Step and repeat Banner	84.66
07/21/2021	Staples	600 S St W, Raynham, MA 02767	Poster Print	75.93
07/21/2021	Michaels	9 Mozzone Blvd Unit 100, Taunton, MA 02780	Decorations for Campaign Kickoff Event	92.67
07/21/2021	BellaRose Crafty Creations	110 North Walker Street Taunton, MA 02780	Custom Hangers for Event	120.00
07/21/2021	SignaRama	21 New State Hwy 44 Ste, Raynham, MA 02767	Lawnsigns	105.94
07/21/2021	Staples	600 S St W, Raynham, MA 02767	Postcards	71.44
07/24/2021	Trescott Gallery	8 Trescott Street Taunton, MA 02780	Event Place Rental	150.00
07/24/2021	FreshFit Meals	Abimael Cruz 154 broadway Taunton, MA 02780	Catering for Kickoff Event	600.00
08/09/2021	Standard Modern	186 Duchane Blvd New Bedford, MA 02740	Lawnsigns	638.27
08/09/2021	Standard Modern	186 Duchane Blvd New Bedford, MA 02740	186 Duchane Blvd New Bedford, MA 02740	515.31
		Line 12: Total Expenditures over	er \$50 (or listed above)	2509.42
		Line 13: Total Expenditures \$50	and under* (not listed above)	307.75
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	2817.17

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				L
				-
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50	and under* (not listed above)	
			DITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
				-
		Line 15: In-Kind Contributions over \$50 (or listed above)		
			\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		-		